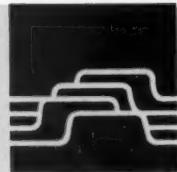


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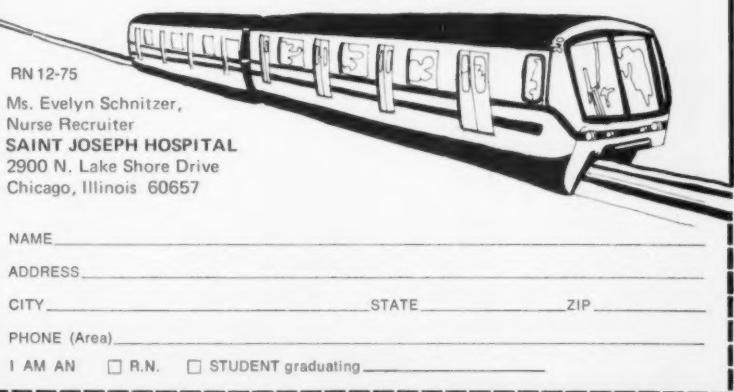
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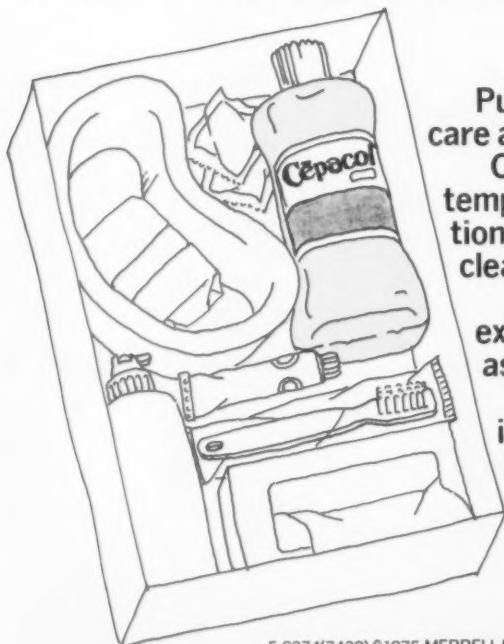


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STATEMENT OF OWNERSHIP, MANAGEMENT, AND CIRCULATION

(Act of August 12, 1970; Section 3685, Title 39, United States Code)

1. Title of publication: *RN Magazine*
2. Date of filing: Oct. 1, 1975
3. Frequency of issue: Monthly
- 3A. Annual subscription price: \$8
4. Location of known office of publication: 496 Kinderkamack Road, Oradell, Bergen County, N.J. 07649
5. Location of the headquarters or general business offices of the publishers: 550 Kinderkamack Road, Oradell, Bergen County, N.J. 07649
6. Names and addresses of publisher, editor, and managing editor:
Publisher: James A. Clements, 496 Kinderkamack Road, Oradell, N.J. 07649
Editor: Edward M. Friedman, 496 Kinderkamack Road, Oradell, N.J. 07649
Managing Editor: John Middleton, 496 Kinderkamack Road, Oradell, N.J. 07649
7. Owner: Medical Economics Company, 550 Kinderkamack Road, Oradell, N.J. 07649, a division of Litton Industries, Inc., Beverly Hills, Calif.
8. Known bondholders, mortgagees, and other security holders owning or holding 1% or more of total amount of bonds, mortgages or other securities: None
9. Not applicable
10. Not applicable
11. Extent and nature of circulation:

| | Average No. Copies Each Issue During Preceding 12 Months | Actual No. Copies Of Single Issue Published Nearest To Filing Date |
|--|---|---|
| A. Total No. copies printed (<i>Net press run</i>) | 228,827 | 211,988 |
| B. Paid circulation | | |
| 1. Sales through dealers and carriers, street venders, and counter sales | 0 | 0 |
| 2. Mail subscriptions | 201,624 | 204,406 |
| C. Total paid circulation | 201,624 | 204,406 |
| D. Free distribution by mail, carrier, or other means | 25,314 | 6,283 |
| E. Total distribution (<i>Sum of C and D</i>) | 226,938 | 210,689 |
| F. Copies not distributed | | |
| 1. Office use, left-over unaccounted, spoiled after printing | 1,889 | 1,299 |
| 2. Returns from news agents | 0 | 0 |
| G. Total (<i>Sum of E & F—should equal net press run shown in A</i>) | 228,827 | 211,988 |

I certify that the statements made by me above are correct and complete.

(signed) James A. Clements, Publisher



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January through December, 1975

Vol. 38, Nos. 1-12

Each listing shows title of major article (asterisked) or short item, date of issue, and page number. Back copies of *RN* may be purchased, while the supply lasts, at \$1.00 each.

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Nightmares can be sign patient awakened in OR

Psychiatrist Richard S. Blacher of Tufts University has encountered six patients who experienced nightmares or anxiety after surgery that disappeared when it was suggested that they had awakened during the operation.

Five of the six had nightmares in

which they felt tied down or unable to move. The sixth didn't have dreams, but complained of marked anxiety and was haunted by memories of snatches of the surgical experience.

None of the six received any support or explanation of this phenomenon immediately before or after the operation. OR personnel

were unaware that they had awakened.

"Perhaps the best measure for resolution of such trauma," says Dr. Blacher, "is an awareness on the part of nurses and physicians that the condition may exist, since a simple discussion of the matter with the patient invariably serves as a cure, in our experience."

OR/ED SUBJECT INDEX

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Warnings: Should be administered with caution to patients with history of hypersensitivity to SILVADENE Cream. If allergic reactions attributable to treatment with SILVADENE Cream occur, discontinue use. *USE IN PREGNANCY:* Not recommended for the treatment of women of childbearing potential unless the burned area covers more than 20 percent of the total body surface area or the need for therapeutic benefit is, in the physician's judgment, greater than the possible risk to the fetus.

In the treatment of burn wounds over extensive areas of the body, the serum sulfa concentration may approach adult therapeutic levels (8-12 mg %). It would be advisable to monitor serum sulfa concentrations. Renal function should be carefully monitored and the urine should be checked for sulfa crystals. **Precautions:** If hepatic and renal functions become impaired due to accumulation of drug, discontinuation of the drug should be weighed against the therapeutic benefit being achieved. In using topical proteolytic enzymes in conjunction with SILVADENE Cream, the possibility should be noted that silver may inactivate such enzymes.

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Dosage and Administration: Apply with sterile, gloved hand to burn area. Apply once to twice daily. Reapply to any areas from which it has been removed by patient activity. Administration may be with or without dressings.

Reduction in bacterial growth after application of topical antibacterial agents has been reported to permit spontaneous healing of deep partial thickness burns by preventing conversion of the partial thickness to full thickness by sepsis. However, reduction in bacterial colonization has caused delayed separation, in some cases necessitating escharotomy in order to prevent contracture.

Treatment should be continued until satisfactory healing has occurred or until the burn site is ready for grafting. *The drug should not be withdrawn from the therapeutic regimen while there remains the possibility of infection except if a significant adverse reaction occurs.*

PHARMACEUTICAL DIVISION
KANSAS CITY, MISSOURI 64137**ON THE OR/ED SCENE**

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